## Notification c Hazardous Waste Site

**United States Environmental Protection** Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compen- paper. Indicate the letter of the item sation, and Liability Act of 1980 and must which applies.

Please type or print in ink. If you need additional space, use separate sheets of

|                | be mailed by June 9, 1981.  |   | I           | N#8             | 20 8/000   | Ins              | 5-000          | -001-                                    | 172                                 |
|----------------|---|---|-------------|-----------------|--|------------------|----------------|--|-------------------------------------|
| $\overline{A}$ | Person Required to Notify:  |   |             |                 |  |                  |                |  |                                     |
|                | Enter the name and address of the person or organization required to notify.  |   | Name        | Мови О          | II. CORPORATIO                                     | N                |                |  |                                     |
|                |   |   | Street      | 3821 IN         | dianapolis B <del>o</del>                          | ULE VARD         | BLUC.          |  |                                     |
|                |   | City  | EAST CH     | ICAGO           | Sta  | E NOTANA         | Zip Code       | 46312                                    |                                     |
| 3              | Site Location:  |   | <del></del> |                 |  |                  |                |  |                                     |
|                | Enter the common name (if known) and actual location of the site.   |   | Name of Sit | e MOBIL         | OIL CORPORATI                                      | ON, EAST         | CHICAGO T      | ERMINAL                                  |                                     |
|                |   |   | Street      | 3821 I          | NDIANAPOLIS B                                      | QULF VARD        | BLUD.          |  |                                     |
|                |   | Street  | <u> </u>    |                 | ***************************************            | IN               |                | \. C = 4 =                               |                                     |
| IND042329631   |   |   | City EAS    | T CHICAG        | O County LA  | KE Sta           | te I NO I A NA | Zip Code                                 | 46312                               |
| C              | Person to Contact:  |   |             |                 |  |                  |                |  |                                     |
|                | Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form. |   | Name (Last, | First and Title | ) SWEET, GERA                                      | LD D., TE        | RMINAL SL      | PERINTE                                  | NDENT                               |
|                |   |   | Phone       | 219-397         | -1950  |                  |                |  |                                     |
|                |   |   | <del></del> | <del></del>     |  |                  |                |  |                                     |
| D              | Dates of Waste Handling:  |   |             |                 |  |                  | EPA Regio      | n 5 Records (                            | Ctr                                 |
|                | Enter the years that you estimate v   |   | 1.006       | - W 1           | 1 07/1   |                  |                |  |                                     |
|                | treatment, storage, or disposal beg-<br>ended at the site.  | From (Year)   | 1926        | To (Year)       | 1974   |                  |                |  |                                     |
|                |   |   |             |                 |  |                  |                |  |                                     |
| E              | Waste Type: Choose the option   | you pr  | efer to co  | mplete          |  | · · · · · ·      |                |  |                                     |
|                | Option I: Select general waste types and so you do not know the general waste types or encouraged to describe the site in Item I—D          |   | sources, v  | ou are          | Option 2: This<br>Resource Cons<br>regulations (40 | ervation and     | Recovery Ad    |  |                                     |
|                | Place an X in the appropriate   | e appropriate Place an X in the ories listed boxes. |             |                 |  |                  |                | 3001 of RC<br>ces provide<br>can be obto | RA. Enter the d. A copy of ained by |
|                | 1. ☐ Organics   | ning  | located.    |                 |  |                  |                |  |                                     |
|                | 2.  Inorganics  |   | nstruction  |                 | ко48   | 7                |                |  |                                     |
|                | 3.  Solvents  | 3. □ Te   | xtiles      |                 | K040<br>K051                                       | ┥ ├──            |                | <u> </u>                                 |                                     |
|                | 4. ☐ Pesticides   | 4. □ Fe   | rtilizer    |                 | K052   | 1                |                | <del> </del>                             |                                     |
|                | <ol><li>☐ Heavy metals</li></ol>  | 5. 🗆 Pa   | per/Printin | ng              | NODE.  | ┨                |                |  |                                     |
|                | 6. ☐ Acids  | 6. □ Le   | ather Tann  | ing             |  |                  |                |  |                                     |
|                | 7.  Bases   | 7. 🗆 Iro  | n/Steel Fo  | undry           |  | 1                |                |  |                                     |
|                | 8. 🗆 PCBs   |   | emical, Ge  |                 |  | 1                |                |  |                                     |
|                | 9.   Mixed Municipal Waste  |   | ting/Polis  | _               |  | 1                |                | <del></del>                              |                                     |
|                |   | 10. 🗆 Mi  | litary/Amn  | nunition        |  |                  |                |  |                                     |
|                |   | ectrical Cor  |             |                 | 1  |                  |                |  |                                     |
|                |   | ansformers  |             |                 |  |                  | <b>L</b>       |  |                                     |
|                |   | ility Compa   |             |                 | _  |                  |                |  |                                     |
|                |   |   | nitary/Ref  | use             | 000  | <b>1</b> 48 J    | ∏ -Ω R1        |  | •                                   |
|                |   | I5. □ Ph  |             |                 |  | <b>y</b> 1 ∪ 0 . | , () ()        |  |                                     |
|                |   |   | b/Hospital  |                 | -  |                  |                |  |                                     |
|                | 17. □ Un  |   |             |                 |  |                  |                |  |                                     |
|                | 1   | 18. 🗆 Otl   | her (Specif | γ)              |  |                  |                |  |                                     |

|                | Notification of Hazardous Waste Site  | Side Two  |   |  |  |  |  |  |  |  |
|----------------|---|---|---|--|--|--|--|--|--|--|
| F              | Waste Quantity;   | Facility Type   | Total Facility Waste Amount   |  |  |  |  |  |  |  |
|                | Place an X in the appropriate boxes to indicate the facility types found at the site.  In the "total facility waste amount" space   | 1. ☐ Piles 2. ☐ Land Treatment  | gallons Total Facility Area   |  |  |  |  |  |  |  |
|                | give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.  | 3. ☑ Landfill 4. ☐ Tanks 5. ☑ Impoundment   |   |  |  |  |  |  |  |  |
|                | In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.  | 6. ☐ Underground Injection 7. ☐ Drums, Above Ground 8. ☐ Drums, Below Ground 9. ☐ Other (Specify) | square feet  Lacres 0.87  |  |  |  |  |  |  |  |
| $\overline{G}$ | Known, Suspected or Likely Releases to the Environment:   |   |   |  |  |  |  |  |  |  |
|                | Place an X in the appropriate boxes to indicate or likely releases of wastes to the environment   |   | ☐ Known ☐ Suspected ☐ Likely ☐ None  X None Known   |  |  |  |  |  |  |  |
|                | Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.  |   |   |  |  |  |  |  |  |  |
| H              | Sketch Map of Site Location: (Optional) Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.   |   |   |  |  |  |  |  |  |  |
|                |   | •   |   |  |  |  |  |  |  |  |
|                | •   |   | ·   |  |  |  |  |  |  |  |
|                |   |   |   |  |  |  |  |  |  |  |
|                |   |   |   |  |  |  |  |  |  |  |
| 1              | Description of Site: (Optional)  Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions. |   |   |  |  |  |  |  |  |  |
|                | This site shut down refinery operations in 1974 and has since operated as a petroleum storage and distribution location only. The refinery was in operation for many years and it is possible that other refinery wastes may have been stored, treated or disposed of on site, but we have no information concerning them.                                |   |   |  |  |  |  |  |  |  |
|                |   |   |   |  |  |  |  |  |  |  |
| J              | (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional.  Check the boxes which best describe the relationship to the site of the person               | Name G. D. SWEET, TERMINAL  Street  City State  Signature J. D. Sweet                             | SUPERINTENDENT  CX Owner, Present  Owner, Past  Transporter  XX Operator, Present  Operator, Present  Operator, Past  Other |  |  |  |  |  |  |  |